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CERTIFICATE OF MAILING

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Typed or Printed Name **KIMBERLY W ZUEHLKE**

Signature *Kimberly W Zuehlke*

Date **19 January 2001**

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Attorney Docket	HORN-003
First Named Inventor	Gerald Horn
Application Number	09/705,526
Filing Date	November 3, 2000
Group Art Unit	To Be Assigned
Examiner Name	To Be Assigned
title	<i>Method and Composition Which Reduces Stimulation of Muscles Which Dilate the Eye</i>

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Issue Fee Transmittal (with copy of PTOL-85B)	<input type="checkbox"/> Request for Refund
<input type="checkbox"/> Amendment/Response	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> After Final Affidavits/declaration(s)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition Routing Slip and Accompanying Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Information Disclosure Statement, 1449 and 16 references	<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Revocation	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Return Postcard
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Associate	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 (with copy of Notice to File Missing Parts)	<input type="checkbox"/> Change of Correspondence Address	
	<input type="checkbox"/> Terminal Disclaimer	
	<input type="checkbox"/> Small Entity Statement	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name	Karl Bozicevic	Registration No.	28,807
Firm Name	BOZICEVIC, FIELD & FRANCIS LLP		
Signature	<i>[Signature]</i>		
Date	JAN 18, 2001		

U.S. PATENT & TRADEMARK OFFICE
JAN 23 2001

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date.			
Typed or Printed Name	KIMBERLY W ZUEHLKE		Date
Signature	Kimberly W Zuehlke		19 January 2001
INFORMATION DISCLOSURE STATEMENT Address to: Assistant Commissioner for Patents Washington, D.C. 20231		Attorney Docket	HORN-003
		First Named Inventor	Gerald Horn
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		Group Art Unit	To Be Assigned
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		Title: "METHOD AND COMPOSITION WHICH REDUCES STIMULATION OF MUSCLES WHICH DILATE THE EYE"	

Sir:

This is an Information Disclosure Statement submitted for the Examiner's consideration. A Form PTO-1449 listing the references accompanies this paper. Applicants would appreciate the Examiner's initialing and returning the form to indicate that the references have been reviewed and made of record.

This Information Disclosure Statement is not intended as a representation that a search has been made, that additional information material to the examination of this application does not exist, or that any one of the above references constitutes prior art to the present application within the meaning of 35 U.S.C. §102.

As applicants have not yet received a first Action on the merits, no fee is believed to be required for filing this Disclosure Statement. If, however, the PTO finds that for some reason a fee is due, our Deposit Account No. 50-0815 may be charged therefor.

Respectfully submitted,
BOZICEVIC, FIELD & FRANCIS LLP

Date: Jan 18, 2001

By: Karl Bozicevic
Registration No. 28,807

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